

# **EXHIBIT CV-9**

23CV15182  
**O'HAGAN MEYER**  
ATTORNEYS ▲ ADVISORS

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December 8, 2023

**VIA ODYSSEY E-FILE&SERVE:**

Clerk of the Court  
Multnomah County Circuit Court  
1200 SW 1st Ave  
Portland, OR 97204

Re: Collaborative Vision, LLC v. Q5id, Inc.  
Multnomah County Circuit Court Case No. 23CV15182

Dear Court Clerk:

Enclosed please find a true and correct copy of the bankruptcy petition filed in the Western District of Texas on behalf of defendant Q5id, Inc.

In light of this pending bankruptcy, defendant requests that a stay be issued in this matter pursuant to 11 U.S.C. § 362.

Sincerely,



Bradley J. Krupicka  
Alexandra K. McLain  
O'HAGAN MEYER PLLC

BJK/AKM:hac  
Enclosure  
Cc: Peter Richter

**Fill in this information to identify the case:**

United States Bankruptcy Court for the:

**WESTERN DISTRICT OF TEXAS**Case number (if known): \_\_\_\_\_ Chapter **7**☐ Check if this is an amended filingOfficial Form 205**Involuntary Petition Against a Non-Individual****12/15**

Use this form to begin a bankruptcy case against a non-individual you allege to be a debtor subject to an involuntary case. If you want to begin a case against an individual, use the *Involuntary Petition Against an Individual* (Official Form 105). Be as complete and accurate as possible. If more space is needed, attach any additional sheets to this form. On the top of any additional pages, write debtor's name and case number (if known).

**Part 1: Identify the Chapter of the Bankruptcy Code Under Which Petition is Filed****1. Chapter of the Bankruptcy Code**

Check one:

☒ Chapter 7☐ Chapter 11**Part 2: Identify the Debtor****2. Debtor's name****ArtiusID, Inc.****3. Other names you know the debtor has used in the last 8 years****Q5ID, Inc.**

Include any assumed, names, trade names, or *doing business as* names.

**4. Debtor's federal Employer Identification Number (EIN)**☒ Unknown

EIN

**5. Debtor's address****Principal place of business****801 Barton Springs**

Number Street

**Austin**

City

**TX 78704**

State ZIP Code

**Mailing address, if different**

Number Street

P.O. Box

City

State ZIP Code

**Location of principal assets, if different from principal place of business**

Number Street

City

State ZIP Code

**6. Debtor's website (URL)**

Debtor ArtiusID, Inc. Case number (if known) \_\_\_\_\_  
 Name

7. **Type of debtor**
- ☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))  
☐ Partnership (excluding LLP)  
☐ Other type of debtor. Specify: \_\_\_\_\_
8. **Type of debtor's business**
- Check one:
- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
☐ Railroad (as defined in 11 U.S.C. § 101(44))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))  
☒ None of the types of business listed.  
☐ Unknown type of business.
9. **To the best of your knowledge, are any bankruptcy cases pending by or against any partner or affiliate of this debtor?**
- ☒ No  
☐ Yes. Debtor \_\_\_\_\_ Relationship \_\_\_\_\_  
 District \_\_\_\_\_ Date filed \_\_\_\_\_ Case number, if known \_\_\_\_\_  
 MM / DD / YYYY

### Part 3: Report About the Case

10. **Venue**
- Check one:
- ☒ Over the last 180 days before the filing of this bankruptcy, the debtor had a domicile, principal place of business, or principal assets in this district longer than in any other district.  
☐ A bankruptcy case concerning debtor's affiliates, general partner, or partnership is pending in this district.
11. **Allegations**
- Each petitioner is eligible to file this petition under 11 U.S.C. § 303(b).  
 The debtor may be the subject of an involuntary case under 11 U.S.C. § 303(a).  
*At least one box must be checked:*
- ☒ The debtor is generally not paying its debts as they become due, unless they are the subject of a bona fide dispute as to liability or amount.  
☐ Within 120 days before the filing of this petition, a custodian, other than a trustee, receiver, or an agent appointed or authorized to take charge of less than substantially all of the property of the debtor for the purpose of enforcing a lien against such property, was appointed or took possession.
12. **Has there been a transfer of any claim against the debtor by or to any petitioner?**
- ☒ No  
☐ Yes. Attach all documents that evidence the transfer and any statements required under Bankruptcy Rule 1003(a).

13. Each petitioner's claim	Name of petitioner	Nature of petitioner's claim	Amount of the claim above the value of any lien
	Xmogriify, LLC	Services provided	\$287,812.89
	Goldstein Consulting Services, LLC	Services provided	\$131,390.00
	Rearc LLC	Services provided	\$556,070.00

Debtor ArtiusID, Inc. Case number (if known) \_\_\_\_\_  
Name

Total of petitioners' claims \$975,272.89

If more space is needed to list petitioners, attach additional sheets. Write the alleged debtor's name and the case number, if known, at the top of each sheet. Following the format of this form, set out the information required in Parts 3 and 4 of the form for each additional petitioning creditor, the petitioner's claim, the petitioner's representative, and the petitioner's attorney. Include the statement under penalty of perjury set out in Part 4 of the form, followed by each additional petitioner's (or representative's) signature, along with the signature of the petitioner's attorney.

#### Part 4: Request for Relief

**WARNING** – Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Petitioners request that an order for relief be entered against the debtor under the chapter of 11 U.S.C. specified in this petition. If a petitioning creditor is a corporation, attach the corporate ownership statement required by Bankruptcy Rule 1010(b). If any petitioner is a foreign representative appointed in a foreign proceeding, attach a certified copy of the order of the court granting recognition.

I have examined the information in this document and have a reasonable belief that the information is true and correct.

#### Petitioners or Petitioners' Representative

##### Name and mailing address of petitioner

Xmogrify, LLC

Name

23 Arden Drive

Number Street

Hartsdale

NY

10530

City

State

ZIP Code

##### Name and mailing address of petitioner's representative, if any

David Levy

Name

23 Arden Drive

Number Street

Hartsdale

NY

10530

City

State

ZIP Code

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 11/29/2023

MM / DD / YYYY

X

Signature of petitioner or representative, including representative's title

#### Attorneys

Jason Binford

Printed name

Ross, Smith & Binford, PC

Firm name, if any

2003 N. Lamar Blvd., Ste. 100

Number Street

Austin

TX

78705

City

State

ZIP Code

Contact phone 512-351-4778

Email

jason.binford@rsbfirm.com

Bar number

24045499

State

TX

X

Signature of attorney

Date signed

11/29/2023

MM / DD / YYYY

Debtor ArtiusID, Inc. Case number (if known) \_\_\_\_\_  
Name

**Name and mailing address of petitioner**

**Goldstein Consulting Services, LLC**

Name  
**4445 Post Road, Apt. 5D**  
Number Street  
**Bronx NY 10471**  
City State ZIP Code

**Name and mailing address of petitioner's representative, if any**

**Kevin Goldstein**

Name  
**4445 Post Road, Apt. 5D**  
Number Street  
**Bronx NY 10471**  
City State ZIP Code

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 11/29/2023  
MM / DD / YYYY

X  Member  
Signature of petitioner or representative, including representative's title

**Jason Binford**

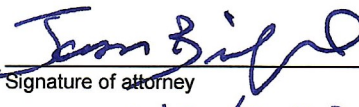
Printed name  
**Ross, Smith & Binford, PC**  
Firm name, if any  
**2003 N. Lamar Blvd., Ste. 100**  
Number Street  
**Austin TX 78705**  
City State ZIP Code

Contact phone 512-351-4778

Email jason.binford@rsbfirm.com

Bar number 24045499

State TX

X   
Signature of attorney  
Date signed 11/30/2023  
MM / DD / YYYY

**Name and mailing address of petitioner**

**Rearc LLC**

Name  
**1216 Broadway, Suite 218**  
Number Street  
**New York NY 10001**  
City State ZIP Code

**Name and mailing address of petitioner's representative, if any**

**Mahesh Varma**

Name  
**1216 Broadway, Suite 218**  
Number Street  
**New York NY 10001**  
City State ZIP Code

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 11/29/2023  
MM / DD / YYYY

X  Member  
Signature of petitioner or representative, including representative's title

**Jason Binford**


Printed name  
**Ross, Smith & Binford, PC**  
Firm name, if any  
**2003 N. Lamar Blvd., Ste. 100**  
Number Street  
**Austin TX 78705**  
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Bar number 24045499

State TX

X   
Signature of attorney  
Date signed 11/30/2023  
MM / DD / YYYY